This document summarizes changes in *Policy 503 Data and Safety Monitoring* (referred to as Policy 503 in this document) that NIH investigators should be aware of, from the SOP mentioned below.

The policy establishes the requirements for inclusion of a Data and Safety Monitoring Plan (DSMP) in non-exempt human subjects research protocols conducted by the NIH Intramural Research Program (IRP) and the requirements for IRB review of such DSMPs.

NIH investigators are responsible for reviewing Policy 503 and complying with the requirements of the policy.

Note: Text from the policy and policy titles are italicized.

Policy 503 Data and Safety Monitoring	**SOP Superseded by Policy 503**
Policy 503 fully supersedes	***SOP 17 Data and Safety Monitoring***
Applicability of Policy 503 - This policy applies to: • **NIH investigators conducting non-exempt human subjects research** • **NIH Institutes and Centers (ICs) that support and manage non-exempt human subjects research conducted by NIH investigators** • **The NIH Institutional Review Board when it is the reviewing IRB** • **Non-NIH investigators when submitting to the NIH IRB as the Reviewing IRB**	
Policy Requirement	**SOP Requirement**
Section C.1. – All non-exempt human subjects research protocols must include: a data safety monitoring plan (DSMP) that is commensurate with the level of risk of the research, to monitor the data collected, and to ensure the safety of subjects. AND **Section C.2.** – *The DSMP must be described in the protocol and submitted to the IRB for review.* See also **Section E.1.a.** which specifies this as a PI responsibility. These requirements are unchanged from SOP 17, but now include reference to the NIH scientific review policy which did not exist when SOP 17 was last revised.	**Section 17.2** – *In accordance with regulatory requirements (45 CFR 46.111 (a)(6) and 21 CFR 56.111 (a)(6) Criteria for IRB approval of research and 21 CFR 50.24(a)(7)(iv) Exception from informed consent requirements for emergency research), the NIH Human Research Protection Program (HRPP) requires inclusion of data and safety monitoring plans (DSMPs) in all research protocols submitted to NIH IRBs…*
Section C.3. – *For FDA-regulated emergency research for which informed consent is excepted, the requirement at 21 CFR 50.24(a)(7)(iv) specifies the establishment of an independent data monitoring committee to provide oversight over the clinical research.* AND **Section E.1.g.** – *For FDA-regulated emergency research for which informed consent is*	See above. **Section 17.2.** – *The IC, the FDA or an IRB can require that a DSMP identify an independent data and safety monitoring entity (e.g. a medical monitor or a Data and Safety and Monitoring Board).*

excepted, the requirement at 21 CFR 50.24 (a)(7)(iv), the PI must ensure the establishment of an independent data monitoring committee to exercise oversight of the clinical investigation. This policy is reorganized for clarity, but the requirement is unchanged from SOP 17.	
Section C.4. – *Institutes and Centers (ICs) are required to ensure a system for appropriate oversight and monitoring of the conduct of clinical trials to ensure the safety of research subjects and the validity and integrity of the data.* And **Section E.3.a.I.** – The NIH Institute or Center (IC), the FDA, a Sponsor, or an IRB can require that a DSMP identify an independent data and safety monitoring entity (e.g. a medical monitor or a Data and Safety and Monitoring Board). **b.** *ICs are responsible for providing adequate resources and staff support to the data and safety monitoring entity and for appointing a medical monitor or members to the DSMB*. This policy is reorganized for clarity, but the requirement is unchanged from SOP 17. NIH PIs should work with their ICs to ensure that adequate resources are available to provide appropriate data and safety monitoring for the research being conducted.	**Section 17.2.** – *When DSMPs involve monitoring of research by an NIH Data and Safety and Monitoring Board (DSMB), Institute officials are responsible for DSMB organization, consistent with their Institutes' written procedures.*
Section E.1.a. – *As applicable, the DSMP should:* *I. Identify the data and safety monitoring entity (e.g. PI, medical monitor or DSMB).* *II. The investigator should also provide the following in the DSMP, commensurate with the level of risk and complexity of the study:* *i. The schedule for reporting to the data and safety monitoring entity;* *ii. The frequency of assessments of data or events;* *iii. The stopping rules;* *iv. Plans for interim and/or futility analyses;*	**Section 17.2.** – specifies the same criteria in a more expanded manner.

v. Procedures for communication between the PI, research team members, the study sponsor, the data and safety monitoring entity, the IRB, others at NIH and, as applicable, the coordinating or statistical center, FDA and other study sites. This policy is reorganized for clarity, but the requirement is unchanged from SOP 17.	
Section E.1.b. – **h.** – In addition, NIH PIs are responsible for: *b. Ensuring that the DSMP as outlined in the IRB-approved protocol is followed;* *c. Ensuring that required information is promptly provided to the data and safety monitoring entity;* *d. Notifying the data and safety monitoring entity when there are amendments to the protocol that affect the DSMP;* *e. Responding to the data and safety monitoring entity recommendations. Responses may include providing corrections to errors in fact, responses to recommendations, or requests for corrective action plans;* *f. Providing DSMP reports to the IRB at the time of continuing review or sooner if the report meets the requirements for prompt reporting to the IRB as specific in Policy 801 Reporting Research Events.* *g. For FDA-regulated emergency research for which informed consent is excepted, the requirement at 21 CFR 50.24 (a)(7)(iv), the PI must ensure the establishment of an independent data monitoring committee to exercise oversight of the clinical investigation.* *h. Investigators are expected to be familiar and comply with additional NIH requirements (e.g. the Policy for Scientific Review of Clinical Protocols Utilizing the NIH Intramural Program Submission Requirements and Review Criteria)* This policy is reorganized for clarity, but the requirement is unchanged from SOP 17.	**Section 17.2.** – specifies the same criteria.